

Office of the County Executive

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Susan H. Birch, Director Health Care Authority Cherry Street Plaza 626 8th Avenue SE Olympia, WA 98501

Re: Funding Urgent Care and 23-Hour Crisis Services at Parkland CRC

Dear Director Birch:

The purpose of this letter is to urge the Health Care Authority and the five managed care organizations to fully fund 23-hour crisis services **now**, so that our county residents can receive the vital behavioral health care that they have gone without for six months. To delay adequate funding until the customary rates are established late in spring of 2025, will result in further, unnecessary delay. This would be unacceptable and is entirely avoidable.

The County has a 27-year history of providing crisis services for our residents. As far back as 1997, Pierce County as the then Regional Support Network funded and operated a crisis stabilization unit (CSU), first at Metropolitan Development Council, and then at the Puget Sound Hospital facility. When Optum took over RSN responsibilities, and the hospital closed, it prioritized standing up a new CSU in Fife, the Regional Crisis Center. As the county grew in population, it became clear a second CSU was needed to serve central and south Pierce County. In 2016, a Parkland-area facility was the number one priority of first responders and health care providers. The County and Optum collaborated to open the second CSU in Parkland, which was built and is owned by the County.

These crisis services abruptly ended in March 2024, when Recovery Innovations (RI), the provider at the Fife and Parkland facilities, ceased providing CSU services. Pierce County is the second largest county in Washington State with a population of almost one million people, yet it now lacks a single place for immediate access to behavioral health crisis care for all individuals. More than half of the Parkland CRC clients were referred by and transported from nearby emergency departments. Without an operational Parkland CRC to quickly and easily drop off individuals in crisis, our first responders are left with the only option of taking individuals to the emergency department, where they may have to wait for hours, or jail. As a result, individuals in Pierce County are languishing in overwhelmed emergency departments—that are often unequipped to treat behavioral health crises—while awaiting costly and restrictive inpatient placement and first responders are taken out of the field for long periods of time transporting and waiting with individuals in crisis. The burden of not having someplace to go is felt by everyone.

The HCA has the legal responsibility to fund and provide crisis services in Pierce County. (RCW 71.24.035 and 71.24.045). After RI gave notice that it would cease to operate, your agent, Carelon Behavioral Health, issued an RFI. After a careful scoring process, involving all five MCOs, it selected Connections

Health Services as the successful bidder to provide urgent care and 23-hour services at our Parkland facility. Connections has indicated they can reopen Parkland and transform the CRC into the unequivocal front door to the crisis system. Connections specializes in providing immediate, short-term care for individuals experiencing acute behavioral health crises utilizing a model recognized by SAMHSA as a best practice and aligned with Washington State Senate Bill 5120. Connections will operate a 24/7 behavioral health urgent care and 23-hour observation unit at the CRC. Their model is designed to:

- Accept both walk-ins and first responder drop-offs.
- Rapidly stabilize individuals in crisis, including the highest acuity (danger to self/others, violent, involuntary status, etc.)
- Leverage a multidisciplinary medical team, including 24/7 behavioral health medical providers (MDs, NPs, PAs), nursing staff, peer support, case management, and behavioral health specialists.
- Perform safety planning and coordinate care post-crisis to avoid readmission and reutilization
- Provide evidence-based interventions aligned with best practices in crisis management.

Connections will facilitate transitions to appropriate outpatient and inpatient care. Connections reports that at its other crisis facilities, more than 90% of individuals have a behavioral health follow-up within 7 days of discharge. Ultimately, more individuals will be able to get healthier faster and continue treatment in the community. The cumulative effect of Connections' model is savings from reduced reliance on institutional psychiatric care, emergency departments, and first responder contacts and transports.

Connections reports that a fundamental barrier to reopening this year is that the HCA and the MCOs may not commit to paying adequate rates for these services now, even though the state is funding two crisis service facilities through the MCOs and the MCOs have not had to pay for them since March and will continue to receive such funding for the rest of 2024 and into the next year. Some MCOs have hinted that they do not want to begin negotiating rates for these services until HCA completes the actuarial rate-setting process for the 23-hour crisis relief center service.

We urge the HCA to direct the MCOs to pay adequate rates so that Connections can reopen and operate the Parkland facility as soon as possible, and certainly by the end of the year. We understand those rates are known to the HCA and the MCOs because they will be paid to Connections to operate the Kirkland crisis recovery center opening next month. We remind you, and the MCOs, that they are required to pay for crisis services under the network adequacy requirements of their Medicaid contracts. Prompt MCO approval of adequate rates is required to comply with their network adequacy requirements.

We request confirmation that the MCOs have agreed to fully fund crisis services now in Pierce County, not in the spring of 2025, by no later than August 9, 2024.

Sincerely,

Bruce F. Dammeier Pierce County Executive

Cc: Pierce County Council